

Section 6 Suicide Circumstance Elements

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Circumstances known: Circ

Name	Definition
Circ	Indicates if any information is available about the circumstances associated with the incident

Uses

This variable operates as a stem question.

Discussion

Do not code this variable as “no” until you have reviewed all of the data from this source that you intend to review for this case.

Name	Label	Table	Type	Field length	Priority	Primacy
Circ	Circumstances known:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:

Circ

0 No

1 Yes

Current depressed mood: Depres**Name Definition**

Depres	Current depressed mood
--------	------------------------

Uses

Identifies suicide victims who were documented as having a current depressed mood. A family member frequently reports that the suicide victim “had been depressed lately,” but the record does not supply information about whether the person was diagnosed with a depressive disorder. Rather than coding such a victim as suffering from depression (which may or may not be true), this variable captures the available information more appropriately.

Discussion

Code this variable as “yes” if the victim was perceived by self or others to be depressed. Other words that can trigger coding this variable besides “depressed” are sad, despondent, down, blue, low, unhappy, etc. Words that should not trigger coding this variable are upset, up and down, agitated, angry, mad, anxious, overwrought, etc. The depressed mood may be part of a clinical depression or a short-term sadness. Depressed mood should not be inferred by the coder based on the circumstances; rather it must be noted in the record.

Case Examples**Yes**

- Mother reports that victim has been depressed for the past few months.
- Husband states that his wife was suffering from depression at the time she took her life.
- Decedent was saddened by his brother’s death a year ago and had not been himself since.

No

- Victim was agitated over news that he may receive a pink slip at work.
- Victim was upset because he had just discovered his girlfriend was cheating on him.
- Elderly victim lived alone, was facing foreclosure, was in failing health, and had learned that her grown son was going to prison. (The victim may well have been depressed, given the sad circumstances, but without an affirmative statement in the record about her mood, the variable should not be coded as “yes”.)

Name	Label	Table	Type	Field length	Priority	Primacy
Depres	Current depressed mood:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**Depres**

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

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Current mental health problem: Mental**Name Definition**

Mental	Current mental health problem
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Uses

This variable can be used to examine the role of mental health problems as risk factors for suicide.

Discussion

Code a victim as “yes” for “Mental” if he or she has been identified as having a mental health problem, such as depression, schizophrenia, obsessive-compulsive disorder, etc. Also indicate “yes” if it is mentioned in the CME report that the victim was being treated for a mental health problem, even if the nature of the problem is unclear (e.g., “was being treated for various psychiatric problems”). It is acceptable to endorse this variable on the basis of past treatment of a mental health problem, unless it is specifically noted that the problem has been resolved. For example, if the record states “Victim was hospitalized twice in the past for mental problems,” that is adequate basis for coding “Mental” as “yes”. It is also acceptable to endorse if a mental health problem is noted, but the timeframe is unclear (as in “victim has history of depression”), or if the victim was seeking mental health treatment or someone was seeking treatment on his or her behalf (e.g., “Family was attempting to have him hospitalized for psychiatric problems”). “Mental” should also be coded as “yes” if the victim has a prescription for an antidepressant or other psychiatric medication. The drug list provided in the training notebook identifies drugs that can be considered psychiatric medications.

Case Examples**Yes**

- Toxicology report from CME indicates that the victim tested positive for sertraline (an antidepressant).
- Victim had PTSD — or, Post-traumatic stress disorder.
- History of depression.
- Was under the care of a psychiatrist.

No

- A neighbor indicates that the victim was not acting normally.
- Victim was depressed over a recent break-up. [Code “Current depressed mood”.]

Name	Label	Table	Type	Field length	Priority	Primacy
Mental	Current mental health problem:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**Mental**

- 0 No, Not Collected, Not Available, Unknown
1 Yes

Data Standards or Guidelines

NVISS

DIAGNOSIS

Type of first mental illness treated: MDiag1

Type of second mental illness treated: MDiag2

Other mental health diagnosis: MenTxt

Name	Definition
MDiag1	Type of mental illness treated
MDiag2	Additional type of mental illness treated
MenTxt	Other type of mental illness diagnosis

Uses

For victims who were noted as having a mental health problem, and whose mental health problem has been assessed by a mental health practitioner, these variables identify the victim's diagnoses.

Discussion

These variables indicate the nature of the victim's mental health problem (their diagnosis), if available. Code up to two diagnoses. If a diagnosis is not on the code list, code "Other" and record the diagnosis in the text field, "MenTxt". If the record indicates more than two diagnoses, note the additional diagnoses in "MenTxt". For cases in which the victim was noted as being treated for a mental health problem, but the actual diagnosis is not documented, code "MDiag1" as "Unknown". If the victim had a mental health problem ("Mental" = "yes"), but the nature of the problem has not been diagnosed (e.g., "victim was hearing voices and having paranoid delusions; family was attempting to have victim committed"), code "MDiag1" as "not applicable" since he had not been treated or diagnosed. Do not attempt to apply a diagnosis based on reading the symptoms. While it is acceptable to endorse "Mental health problem" based on the victim's prescription for a psychiatric medication, please do not infer a specific diagnosis based on the medication.

Name	Label	Table	Type	Field length	Priority	Primacy
MDiag1	Type of first mental illness treated:	Person	Number	2	LR/LR	CME/PR
MDiag2	Type of second mental illness treated:	Person	Number	2	LR/LR	CME/PR
MenTxt	Other mental health diagnosis:	Person	Text	50	LR/LR	CME/PR

Response Options:

MDiag1 and MDiag2

- 1 Depression/dysthymia
- 2 Bipolar disorder

- 3 Schizophrenia
- 4 Anxiety disorder
- 5 Post-traumatic stress disorder
- 6 ADD or hyperactivity disorder
- 7 Eating disorder
- 8 Obsessive-compulsive disorder
- 66 Other (specify in diagnosis text)
- 88 Not applicable
- 99 Unknown

MenTxt

Current treatment for mental illness: TxMent**Ever treated for mental illness: HistMental**

Name	Definition
TxMent	Currently in treatment for a mental health problem
HistMental	History of ever being treated for a mental health problem

Uses

This variable can be used to assess the proportion of suicide victims who were currently or formerly in mental health treatment. The information can be helpful in planning and delivering mental health services and in evaluating quality of care.

Discussion

The variable “TxMent” (current mental health treatment) should be coded “yes” if the victim was in current treatment (that is, had a current prescription for a psychiatric medication or saw a mental health professional within the past two months.) Treatment includes seeing a psychiatrist, psychologist, medical doctor, therapist, or other counselor for a mental health or substance abuse problem; receiving a prescription for an antidepressant or other psychiatric medicine (see training notebook for list of psychiatric drugs); or residing in an inpatient or halfway house facility for mental health problems. The variable “HistMental” indicates whether the victim was noted as ever having received professional treatment for a mental health problem, either at the time of death or in the past. If a victim is in current treatment, by definition “HistMental” (ever in treatment) should be endorsed. If a decedent died as the result of an overdose from multiple medications and it is not clear whether the medications were his or her own (as in a victim swallowing everything in the family’s medicine cabinet), the existence of an antidepressant or other psychiatric medication in the victim’s bloodstream is not sufficient evidence of mental health treatment. For victims who die by other means than drug overdose (e.g., shooting, hanging), toxicologic test results indicating the presence of a psychiatric medication is sufficient evidence of mental health treatment.

Case Examples**Current treatment for mental illness****Yes**

- A recently filled, unopened prescription belonging to the victim for an antidepressant is found in the medicine cabinet.
- The victim has been in treatment for depression for the last 10 years.
- The victim was released from inpatient care for bipolar disorder a week ago. No
- Victim was taking St. John’s Wort (non-prescription herb) for depression because of a magazine article he had read.
- Victim was taking sleeping pills for insomnia.

Ever treated for mental illness**Yes**

- Several years ago the victim was treated for bipolar disorder.
- The decedent had begun seeing a psychiatrist recently, but had previously never been in treatment.

Name	Label	Table	Type	Field length	Priority	Primacy
TxMent	Current treatment for mental illness:	Person	Checkbox	1	LR/LR	CME/PR
HistMental	Ever treated for mental illness:	Person	Checkbox	1	O/O	CME/PR

Response Options:

Histmental

TxMent

0 No, Not Collected, Not Available, Unknown

1 Yes

Data Standards or Guidelines

NVISS

Alcohol dependence: Alcoh
Other substance dependence or abuse: Subst

Name	Definition
Alcoh	Person has alcohol dependence or alcohol problem
Subst	Person has substance abuse problem

Uses

Can be used to assess the proportion of suicide victims who were identified as having alcohol, drug, or other substance abuse problems. The information can be helpful in exploring the role of substance abuse in suicide and planning substance abuse services delivery.

Discussion

Code a victim as “yes” for “Alcoh” or “Subst” if the victim was perceived by self or others to have a problem with, or to be addicted to, alcohol or other drugs. A victim who is noted as participating in a drug or alcohol rehabilitation program or treatment—including self-help groups and 12-step programs—should be coded as “yes” for “Subst” or “Alcoh” respectively even if the victim was noted as being currently clean and sober. A problem from the past (i.e., five years or more ago) that has resolved and no longer appears to apply should not be coded. “Subst” can be endorsed if a victim was noted as using illegal drugs (such as heroin or cocaine), abusing prescription medications (such as pain relievers or Valium), or regularly using inhalants (e.g., sniffing gas). If the victim is mentioned as using illegal drugs—even if addiction or abuse is not specifically mentioned—code “Subst” as “yes”. The exception to this is marijuana use. For marijuana, the use must be noted as chronic, abusive, or problematic (e.g., “victim smoked marijuana regularly,” “victim’s family indicated he had been stoned much of the past month”). A victim who takes methadone can be assumed to be in treatment for heroin addiction. The phrase “history of drug abuse” is sufficient to justify endorsing “Subst”, unless it is noted that the victim is no longer a drug user. Previously attempting suicide via overdose is not sufficient justification for endorsing “Subst” in the absence of other information.

Case Examples

Alcoh

Yes

- CME report indicates the patient was in an alcohol rehabilitation program last year.
- Called AA sponsor the day before the incident.
- Noted in CME report that the victim had been drinking a lot lately and family was concerned.

No

- CME report indicates that 20 years ago the victim had trouble with drugs and alcohol as a teenager, but not since then.

Subst

Yes

- CME report indicates that the victim abuses his own painkiller prescription.

- Victim made regular visits to a methadone clinic.
- Victim had track marks and drug paraphernalia at his apartment.
- Shot himself after a fight with his wife over his drug use and mounting debts. No
- Victim smoked marijuana occasionally.
- Victim attempted suicide via medication overdose on two previous occasions. No evidence of substance use or abuse.

Name	Label	Table	Type	Field length	Priority	Primacy
Alcoh	Alcohol dependence:	Person	Checkbox	1	O/O	CME/PR
Subst	Other substance dependence or abuse:	Person	Checkbox	1	O/O	CME/PR

Response Options:

Alcoh and Subst

0 No, Not Collected, Not Available, Unknown

1 Yes

Data Standards or Guidelines

NVISS

Person left a suicide note: SNote**Name Definition**

SNote	Victim left a suicide note
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Uses

A suicide note is a marker for an intentional suicide.

Discussion

Code “SNote” as “yes” if the victim left a note, e-mail, video, or other written communication that they intended to commit suicide. A will or folder of financial papers near the victim does not constitute a suicide note.

Case Examples**Yes**

- The victim left a letter to her son indicating that she was ending her life.
- “The pain stops today. Goodbye” was the message scrawled on the mirror next to the victim.

No

- A woman is terminally ill. She writes and signs her will. The next day she commits suicide.

Name	Label	Table	Type	Field length	Priority	Primacy
SNote	Person left a suicide note:	Person	Checkbox	1	O/O	CME/PR

Response Options:**SNote**

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

Medical College of Wisconsin Firearm Injury Reporting System

Disclosed intent to commit suicide: SuiInt**Name Definition**

SuiInt	Victim disclosed to another person their intention to commit suicide
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Uses

This variable can be used to identify the subset of suicides for which opportunities to intervene and prevent the death may have been present. It is also useful for exploring stated intent as a risk factor for suicide.

Discussion

Code “SuiInt” as “yes” if the victim had previously expressed suicidal feelings to another person, whether explicitly (e.g., “I’m considering killing myself”) or indirectly (e.g., “I think everyone would be better off without me” or “I know how to put a permanent end to this pain”). Do not code this variable as “yes” if the victim disclosed their intention to kill themselves only at the moment of the suicide (i.e., when there was no opportunity to intervene to stop the suicide). Also, do not endorse this variable if the victim had talked about suicide sometime in the distant past, but had not disclosed their current intent to commit suicide to anyone. When the police, or CME document whether the victim stated their intent to commit suicide, they are doing so less for the purpose of documenting a missed opportunity for intervention and more for the purpose of indicating why the death is being treated as a suicide and not a potential homicide. Therefore, the records may be unclear about timing. For example, the record may state, “Victim has spoken of suicide in the past,” and it is not entirely clear whether the talk about suicide was only in the past or was related to the current incident. This will frequently be a gray area for coding. If the record indicates disclosure of intent in the past but affirmatively states that there was no disclosure for the current incident, code “SuiInt” as “no”. If the record indicates disclosure of intent, but is unclear about the timeframe, code “SuiInt” as “yes”. This will sometimes be incorrect; however the specificity to allow precise coding is too often missing in the records to justify using a narrower interpretation.

Case Examples**Yes**

- The victim told his wife that he was planning to end his suffering and was going to stop being a burden on her.
- The victim has mentioned on and off to friends that he was considering suicide; no one thought he would do it.

No

- The victim has spoken of suicide in the past, but not in the past few months when things seemed to be going better for him.
- Family members were unaware of any suicidal feelings. During a heated argument over being grounded, the young victim shouted, “I’m gonna blow my head off, and it’s your fault.” He left the room and shot himself.

Name	Label	Table	Type	Field length	Priority	Primacy
SuiInt	Disclosed intent to commit suicide:	Person	Checkbox	1	O/O	CME/PR

Response Options:

SuiInt

0 No, Not Collected, Not Available, Unknown

1 Yes

Data Standards or Guidelines

NVISS

History of suicide attempts: SuiHst**Name Definition**

SuiHst	Victim has a history of attempting suicide
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Uses

This variable is useful for exploring suicide attempts as a risk factor for completed suicides and as an opportunity for preventive intervention.

Discussion

Code SuiHst as “yes” if the victim was known to have made previous suicide attempts, regardless of the severity of those attempts.

Name	Label	Table	Type	Field length	Priority	Primacy
SuiHst	History of suicide attempts:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:

SuiHst

0 No, Not Collected, Not Available, Unknown

1 Yes

Data Standards or Guidelines

Medical College of Wisconsin Firearm Injury Reporting System

Crisis in past 2 wks: Crisis

Name	Definition
Crisis	Victim experienced a crisis within two weeks of the suicide, or a crisis was imminent within two weeks of the suicide

Uses

This variable can be used to identify suicides that appear to involve an element of impulsivity.

Discussion

The variable “Crisis” identifies those cases in which a very current crisis or acute precipitating event appears to have contributed to the suicide (e.g., the victim was just arrested; the divorce papers were served that day; the victim was about to be laid off; they had a major argument with their spouse the night before). Coding a case as being related to a crisis does not mean that there aren’t also chronic conditions that have contributed to the victim’s decision to end their life. Examples of crises include a very recent or impending arrest, job loss, argument or fight, relationship break-up, police pursuit, financial loss, loss in social standing, eviction, or other loss. “Crisis” is in the eyes of the victim. This is particularly relevant for young victims whose crises— such as a bad grade or a dispute with parents over a curfew—may be relatively minor.

The qualifier “recent” means that the crisis either occurred within the past two weeks or is expected to occur within the next two weeks. An actual time period is unlikely to be mentioned in the records, so use language as a clue. For example, “decedent was experiencing financial difficulties after losing his job” would not trigger coding a recent crisis because the timeframe is unclear, whereas “decedent had just received a pink slip at work” would be clear. A patient whose chronic health problem is worsening should not trigger coding “Crisis” as “yes”; however a person who just received the news that he or she has a terminal illness should be regarded as having experienced a recent crisis. A homicide-suicide should always be coded as “yes” for “Crisis” unless the two deaths were both clearly consensual and planned in advance (in effect, a double suicide). Release from a jail, prison, or hospital within the past two weeks should be coded as a “Crisis”.

Yes

- The victim’s husband announced that day that he was divorcing her.
- A 15-year-old adolescent had a heated argument with his mother, stormed out of the room, and shot himself.
- The decedent killed his ex-wife and then himself.
- A few days prior to the suicide, the victim was questioned about his suspected sexual abuse of his two nephews by police.
- The victim was about to be returned to prison in a few days.
- After a recent break-up, the decedent went to his girlfriend’s house to attempt a reconciliation. She refused, and he shot himself in her driveway.
- An elderly man fell in the bathtub the week before, breaking his hip. The day before this, his doctor told him that he would need to go to a nursing home.
- Police were pursuing a suspect. As they drew near, the man turned the gun on himself and fired.

- Victim had just received a lay-off notice at work.
- Victim was released from jail earlier that day.

No

- A 45-year-old man was unemployed and experiencing financial difficulties. (Had this statement been added to his case, “was to be evicted from his apartment the following weekend” the case would qualify as a “yes”.)
- The victim had emphysema and the condition was worsening.
- The victim was in the process of divorcing her husband.
- The decedent was despondent over recent job loss. (Timeframe is non-specific; job loss could have been a week or six months ago.)

Name	Label	Table	Type	Field length	Priority	Primacy
Crisis	Crisis in past 2 wks:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:

Crisis

0 No, Not Collected, Not Available, Unknown

1 Yes

Data Standards or Guidelines

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Physical health problem: Health**Name Definition**

Health	Physical health problems appear to have contributed to the suicide
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Uses

This variable identifies suicides that are health-related. Identifying the specific circumstances that play a precipitative role in suicide will assist in identifying, developing, and evaluating preventive interventions.

Discussion

The victim was experiencing physical health problems (e.g., terminal disease, debilitating condition, chronic pain) that were relevant to the suicide event. If the precipitants are known, endorse this variable only if a health problem is noted as contributing to the suicide. CME reports generally include the decedent's existing medical problems. The simple mention of a health problem, therefore, should not trigger coding the suicide as health-related, unless there is some indication that the suicide is linked in part to the health problem or concern. There are some exceptions to this rule, however. If there is no information in the record about why the victim killed him or herself, but it is noted that they had a terminal or very debilitating illness, it is acceptable to endorse Health. Health conditions are coded from the perspective of the victim.

Case Examples**Yes**

- The victim was recently diagnosed with pancreatic cancer and was told that she had two months to live.
- An elderly man fell in the bathtub the week before, breaking his hip. He feared that this injury would require him to sell his house and move into a nursing home.
- The victim suspected he might have AIDS and killed himself before he received his test results.
- The victim is still in pain from injuries sustained in a car crash five years ago.

No

- Victim was fleeing from police. He ran into a restroom and shot himself. He has a history of arrests for violent crime, and his health history indicates diabetes. (No mention of health condition being related to the suicide.)

Name	Label	Table	Type	Field length	Priority	Primacy
Health	Physical health problem:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**Health**

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS.

Intimate partner problem: IPProb**Name Definition**

IPProb	Problems with a current or former intimate partner that appear to have contributed to the suicide
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Uses

This variable identifies suicides that are related to friction or conflict between intimate partners. Identifying specific circumstances that appear to play a precipitative role in suicide will help identify, develop, and evaluate preventive interventions.

Discussion

Code “IPProb” as “yes” if at the time of the incident the victim was experiencing problems with a current or former intimate partner, such as a divorce, break-up, argument, jealousy, conflict, or discord. The burden of caring for an ill spouse should not be coded as an intimate partner problem unless there is also evidence of relationship problems. These should be coded as “other” (SuiOth). Phrases such as “victim was having relationship problems” can be assumed to indicate intimate partner problems. If a victim kills or attacks his or her current or former intimate partner, code “IPProb” as “yes”. The only exception to this rule is if the death was clearly a consensual act, as in a mercy killing followed by homicide. Extreme caution should be used when identifying a case as a mercy killing; see discussion of the variable Mercy (mercy killing).

Case Examples**Yes**

- The victim goes to his old house, shoots his estranged wife, and then shoots himself.
- The victim was engaged in a bitter custody dispute with her ex-husband.
- Police arrested the victim a week ago for violating a restraining order that his girl friend had filed.
- A wife reports that she and the victim had been arguing, and she spent the night at her mother’s.
- The victim was having relationship problems.

No

- The CME report indicates that the victim is a divorced, 50-year-old white male with two grown children; he was recently arrested on his third drunk driving offense and hung himself the day he was released from jail.
- Victim was lonely and felt isolated.

Name	Label	Table	Type	Field length	Priority	Primacy
IPProb	Intimate partner problem:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**IPProb**

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

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Other relationship problem: Relat**Name Definition**

Relat	Problems with a family member, friend, or associate (other than an intimate partner) that appear to have contributed to the suicide
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Uses

This variable identifies suicides that are related to friction or conflict with friends and family. Identifying the specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “Relat” as “yes” if at the time of the incident the victim was experiencing an interpersonal problem with someone other than an intimate partner (e.g., a family member, friend, or schoolmate). Problems with a person at work should be coded as job problems, not “Relat”. If the report indicates that the victim was “having relationship problems,” these should be assumed to be intimate partner problems, and not problems with other friends or family.

Case Examples**Yes**

- A teenager was arguing with his parents because they refused to let him go on a weekend ski trip with his friends.
- A 20 year-old had recently been kicked out of his house by his parents because of arguments and drug use.

No

- Victim was having relationship problems. (Code as intimate partner problem).

Name	Label	Table	Type	Field length	Priority	Primacy
Relat	Other relationship problem:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**Relat**

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Job problem: Job

Name	Definition
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Job	Job problems appear to have contributed to the suicide
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Uses

This variable identifies suicides that are related to job problems. Identifying specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code "Job" as "yes" if at the time of the incident the victim was either experiencing a problem at work (such as tensions with a co-worker, poor performance reviews, increased pressure, feared layoff) or was having a problem with joblessness (e.g., recently laid off, having difficulty finding a job). Do not endorse Job if a person left their job as part of their suicide plan (e.g., "Victim left work four days ago and checked into a hotel; the body was found after co-workers contacted the victim's family to try to locate him").

Case Examples**Yes**

- The victim was in the midst of a sexual harassment action at work.
- The victim was recently laid off at work.

No

- A 66-year-old retired man was found dead in the garage from carbon monoxide poisoning. There is no information available about the circumstances.

Name	Label	Table	Type	Field length	Priority	Primacy
Job	Job problem:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**Job**

- 0 No, Not Collected, Not Available, Unknown
1 Yes

Data Standards or Guidelines

NVISS

School problem: School**Name Definition**

School	Problems at school appear to have contributed to the suicide
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Uses

This variable identifies suicides that are related to problems at school. Identifying specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code "School" as "yes" if at the time of the incident the victim was experiencing a problem such as poor grades, bullying, social exclusion at school, or performance pressures.

Case Examples**Yes**

- A graduate student with a history of alcoholism and depression was feeling overwhelmed by academic pressure.
- Rumors were circulating at the school about the victim, and she had recently lost her circle of friends as a result of the rumors.
- A ninth grader killed himself after bringing home a report card that showed a drop in his grades.

Name	Label	Table	Type	Field length	Priority	Primacy
School	School problem:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**School**

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Financial problem: FinProb**Name Definition**

FinProb	Financial problems appear to have contributed to the suicide
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Uses

This variable identifies suicides that are related to financial problems. Identifying specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “FinProb” as “yes” if at the time of the incident the victim was experiencing a problem such as bankruptcy, overwhelming debts, or foreclosure of a home or business.

Case Examples

Yes

- The victim had a gambling problem and mounting debts.
- The bank was in the process of foreclosing on the victim’s home.
- The victim and his wife were arguing about money problems.

Name	Label	Table	Type	Field length	Priority	Primacy
FinProb	Financial problem:	Person	Checkbox	1	O/O	CME/PR

Response Options:

FinProb

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Recent suicide of friend or family: RecSui

Name	Definition
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RecSui	Suicide of a family member or friend within the past five years appears to have contributed to the suicide
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Uses

This variable identifies suicides that are related to other suicides. This may be useful for identifying suicide clusters. Identifying specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “RecSui” as “yes” if at the time of the incident the victim was distraught over, or reacting to, a relatively recent (within five years) suicide of a friend or family member.

Case Examples

Yes

- The victim had been depressed since the death of his brother who committed suicide a year ago.

No

- The victim is a 36-year-old woman. Her mother committed suicide when she was 12 years old.

Name	Label	Table	Type	Field length	Priority	Primacy
RecSui	Recent suicide of friend or family:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:

RecSui

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Other death of friend or family: FamDeath

Name	Definition
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FamDeath	Death of a family member or friend within the last five years that appears to have contributed to the suicide
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Uses

This variable identifies suicides that are related to the loss of a loved one through means other than suicide. Identifying the specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code “FamDeath” as “yes” if at the time of the incident the victim was distraught over, or reacting to, a relatively recent (within five years) death of a friend or family member.

Case Examples

Yes

- The victim had been depressed since the death of his wife two years ago.
- The victim was a high school student diagnosed with bipolar disorder; a friend had died in a car crash the month before, and the victim was distraught over his loss.

No

- The victim was a widow who was living with her grown daughter. (No mention of timeframe or relationship of the death to the suicide decision.)

Name	Label	Table	Type	Field length	Priority	Primacy
FamDeath	Other death of friend or family:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:

FamDeath

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Recent criminal legal problem: RecCrm**Name Definition**

RecCrm	Criminal legal problems appear to have contributed to the suicide
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Uses

This variable identifies suicides that are related to criminal problems. Identifying the specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code "RecCrm" as "yes" if at the time of the incident the victim was facing criminal legal problems (recent or impending arrest, police pursuit, impending criminal court date, etc.). Committing a crime alone is not sufficient basis for endorsing RecCrm; there must be evidence of negative legal or law enforcement consequences that appear to be associated with the suicide.

Case Examples**Yes**

- The victim has been convicted of a crime and is awaiting his court appearance for sentencing.
- The victim was in jail on a drunk driving arrest.
- Police were in pursuit of the victim who was suspected in a recent robbery

No

- The evening before the victim killed himself he went to his ex-girlfriend's house and sexually assaulted her. (No mention of actual or impending criminal legal or law enforcement problems arising from the criminal activity.)

Name	Label	Table	Type	Field length	Priority	Primacy
RecCrm	Recent criminal legal problem:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**RecCrm**

- 0 No, Not Collected, Not Available, Unknown
1 Yes

Data Standards or Guidelines

NVISS

Other legal problems: Legal**Name Definition**

Legal	Legal (non-criminal) problems appear to have contributed to the suicide
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Uses

This variable identifies suicides that are related to legal problems. Identifying the specific circumstances that appear to play a precipitative role in suicide will help to identify, develop, and evaluate preventive interventions.

Discussion

Code "Legal" as "yes" if at the time of the incident the victim was facing civil legal problems, such as a custody dispute or civil lawsuit, or legal problems that were unspecified as either criminal or civil.

Case Examples**Yes**

- The victim is in the midst of a heated custody battle with his ex-wife.
- The victim is being sued by a former business partner.
- The suicide note refers to the victim's legal problems. (Legal Problem is endorsed rather than Criminal Problem since it is unclear whether the problems are criminal or civil.)

No

- The victim has been arrested for driving while intoxicated. (Code as a Criminal Problem.)

Name	Label	Table	Type	Field length	Priority	Primacy
Legal	Other legal problems:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:

Legal

0 No, Not Collected, Not Available, Unknown

1 Yes

Data Standards or Guidelines

NVISS

Perpetrator of interpersonal violence past mo.: PIPV**Name Definition**

PIPV	Victim was a perpetrator of interpersonal violence within the past month
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Uses

This variable can be helpful in exploring whether violence perpetration is a risk factor for suicide.

Discussion

The victim of the suicide was also the perpetrator of violent crime or interpersonal violence during the month prior to death. “PIPV” should also be coded “yes” if a restraining order has been filed against the victim within the past month.

Case Examples**Yes**

- The suicide victim was also the suspect in the homicide of his wife.
- The victim was being sought by police for a string of robberies and assaults.
- The decedent was distraught over a recent break-up with his girlfriend; she had a restraining order against him.

No

- The police report indicates no recent arrests; although victim was arrested three years ago on an assault charge. (Not recent and no mention of a link to the suicide.)

Name	Label	Table	Type	Field length	Priority	Primacy
PIPV	Perpetrator of interpersonal violence past mo.:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**PIPV**

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS

Victim of interpersonal violence past mo.: PIPVVict

Name	Definition
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PIPVVict	Suicide victim was a victim of interpersonal violence in the past month
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Uses

This variable can be helpful in exploring whether violence victimization is a risk factor for suicide.

Discussion

The victim was a current or recent (within the past month) victim of interpersonal violence.

Case Examples**Yes**

- A teenage girl had been the victim of repeated sexual assaults by her stepfather before she took her life.
- The victim was being abused by her spouse.

No

- A 30-year-old victim had been abused as a child.

Name	Label	Table	Type	Field length	Priority	Primacy
PIPVVict	Victim of interpersonal violence past mo.:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:

PIPVVict

0 No, Not Collected, Not Available, Unknown

1 Yes

Data Standards or Guidelines

NVISS

Other suicide circumstance: SuiOth**Name Definition**

SuiOth	Other specified problems contributed to the victim's suicide
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Uses

“SuiOth” serves as a check on the reporting system; if a high proportion of suicide cases endorse “SuiOth”, the reporting system may not have codes that adequately capture the major precipitative circumstances associated with suicide.

Discussion

“SuiOth” should only be used if a noted contributory circumstance is not already covered by existing variables in the reporting system. Be sure to describe the circumstance in the Incident Narrative.

Case Examples**Yes**

- The victim died from starvation during a hunger strike for a political cause.
- The victim was attacked by three men last summer and was in treatment for PTSD; family states he has been unable to sleep through the night since that incident.

No

- The victim is a teenage boy whose friends have ostracized him. (The case can be coded as Other Relationship Problem and therefore does not need an “other” code.)
- The victim's body was not discovered for two weeks. Hikers found the body and a helicopter was flown in to remove the body. (These details do not describe a precipitative circumstance.)

Name	Label	Table	Type	Field length	Priority	Primacy
SuiOth	Other suicide circumstance:	Person	Checkbox	1	LR/LR	CME/PR

Response Options:**SuiOth**

- 0 No, Not Collected, Not Available, Unknown
- 1 Yes

Data Standards or Guidelines

NVISS